



Read the filing information and instructions on the below.

FT486 (01/01)

PLEASE PRINT IN INK OR TYPE

Name	FEIN/SSN	Report Month/Year
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COMPANY NAME	COMPANY FEIN/SSN	DATE PAID	AMOUNT PAID
			\$
			\$
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			\$
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			\$
			\$
			\$
			\$
		TOTAL AMOUNT PAID	\$

This schedule provides detail to support the amount shown on Line 36 of your monthly Virginia fuels tax report. List only those persons you previously reported as having defaulted on their tax payment by submitting a *Notice of Tax Payment Default* (FT214).

Suppliers can submit a default notice on licensed distributors or importers only. **Providers of Alternative Fuel** can submit a default notice on bonded bulk users or bonded retailer of alternative fuels only.

Terminal Control Number. Enter the IRS Terminal Control Number shown on the *Notice of Tax Payment Default* (FT214).

Amount Paid. Enter the total amount of defaulted tax paid.